



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 1944

|   |   |  |                                   |   |                           |                                |
|---|---|--|-----------------------------------|---|---------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/594,396  | <b>FILING or 371(c) DATE</b><br>09/26/2006<br><b>RULE</b>   | <b>CLASS</b><br>704                                      | <b>GROUP ART UNIT</b><br>2626     | <b>ATTORNEY DOCKET NO.</b><br>0600-1203   |                           |                                |
| <b>APPLICANTS</b><br>Taoufik En-Najjary, Valbonne, FRANCE;<br>Olivier Rosec, Lannion, FRANCE;<br><b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/FR05/00564 03/09/2005<br><b>** FOREIGN APPLICATIONS *****</b><br>FRANCE 0403403 03/31/2004<br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>05/31/2007 |   |  |                                   |   |                           |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and Acknowledged <u>/VIJAY B CHAWAN/</u><br>Examiner's Signature   |   | <input type="checkbox"/> Met after Allowance<br>Initials | <b>STATE OR COUNTRY</b><br>FRANCE | <b>SHEETS DRAWINGS</b><br>5   | <b>TOTAL CLAIMS</b><br>19 | <b>INDEPENDENT CLAIMS</b><br>2 |
| <b>ADDRESS</b><br>YOUNG & THOMPSON<br>209 Madison Street<br>Suite 500<br>Alexandria, VA 22314<br>UNITED STATES  |   |  |                                   |   |                           |                                |
| <b>TITLE</b><br>Voice Signal Conversation Method And System   |   |  |                                   |   |                           |                                |
| <b>FILING FEE RECEIVED</b><br>900   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  |                                   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                           |                                |